



## HOSPITALITY ALCOHOL MANAGEMENT SEMINAR REGISTRATION FORM

A registration form must be submitted for each trainee

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Business Address \_\_\_\_\_ Your Manager's Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Business phone \_\_\_\_\_

How many years have you been at your present place of employment? \_\_\_\_\_

How many years have you been employed in the hospitality industry? \_\_\_\_\_

Have you had any formal training in responsible beverage service or mixology? Yes No

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**Please return your \$75.00 payment with your completed registration form.  
Please mark your choice for training date and send back by the 1st of the month.**

Class Time - 1pm - 5pm

Location: 575 S. 10<sup>th</sup> Street  
Lincoln Police Department  
Main Station

- ☐ January 12, 2017
- ☐ February 9, 2017
- ☐ March 9, 2017
- ☐ April 13, 2017
- ☐ May 11, 2017

Location: 1501 N. 27<sup>th</sup> Street  
27th & Holdrege Streets  
Center Team Police Station

- ☐ June 8, 2017
- ☐ July 13, 2017
- ☐ August 10, 2017
- ☐ September 14, 2017
- ☐ October 12, 2017
- ☐ November 9, 2017
- ☐ December 14, 2017

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**Send payment and form to:**

Responsible Hospitality Council  
c/o City Council  
555 S. 10<sup>th</sup> Street  
Lincoln, NE 68508

If you have questions, call 402.441.7239